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Bib Data Sheet

CONFIRMATION NO. 9630

<b>SERIAL NUMBER</b> 09/995,852	<b>FILING DATE</b> 11/28/2001 <b>RULE</b>	<b>CLASS</b> 434	<b>GROUP ART UNIT</b> 3712	<b>ATTORNEY DOCKET NO.</b> 94604-250152	
<b>APPLICANTS</b> Michael B. Liebeskind, Pepper Pike, OH; <i>ML</i> Brent Kinetz, New York, NY;					
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/287,537 04/30/2001 <i>ML</i>					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY **</b> <b>** 12/12/2001</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance <i>ML</i> Verified and Acknowledged <i>ML</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> OH	<b>SHEETS DRAWING</b> 12	<b>TOTAL CLAIMS</b> 37	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> PILLSBURY WINTHROP LLP <i>ML</i> Suite 2800 725 South Figueroa Street Los Angeles, CA 90017-5406					
<b>TITLE</b> Insurance risk, price, and enrollment optimizer system and method <i>ML</i>					
<b>FILING FEE RECEIVED</b> 1133	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		